

JOB AID

Generating Pharmacy Prior Approval and Naming the Specific Drug Requested on the Adverse Decision Letters

OVERVIEW

This document will guide authorized users on the processes for identifying and generating Pharmacy Prior Approval (PA) Adverse Decision Letters with the name of the specific drug requested. This document will also explain the use of the **Letter Policy and Denial Reason Search** and **PA Spell Check Override Search** pages.

PA Adverse Decision Letters are specific to adverse decisions for Division of Health Benefits (DHB) services and are designed to comply with federal regulations and statutes addressing the due process rights of Medicaid/Health Choice beneficiaries. The **PA Detail** and **Comments/Letters** pages are used to support the PA Adverse Decision Letters.

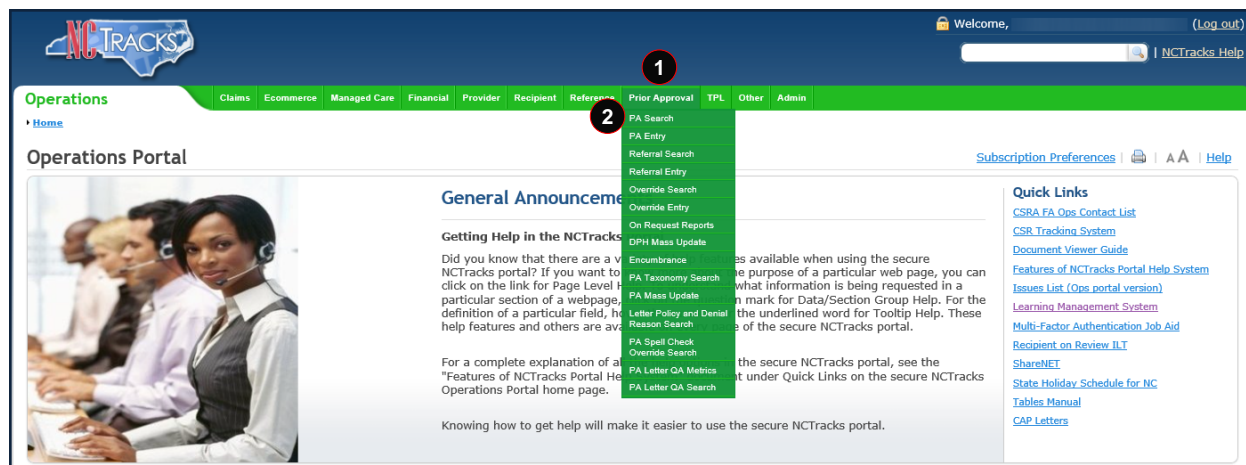
The **Letter Policy and Denial Reason Search** page allows authorized users to perform a search of PA criteria to obtain the different PA criteria sequence numbers (identifying PA policy) associated with the entered search. Additionally, this page allows authorized users to generate new PA criteria sequences.

The **PA Spell Check Override Search** page allows users to search words identified as having spelling errors but overridden by the user. Additionally, authorized users can retrieve the next available word to review for acceptance into the customized spell check dictionary.

GENERATING PA ADVERSE DECISION LETTERS

The PA Adverse Decision Letters are specific to adverse decisions such as Denied, Modified Approved, or Reduction for DHB services.

These letters are generated when the PA request made does not comply with federal regulations. A PA Adverse Decision Letter also includes information that addresses the due process rights of Medicaid/Health Choice beneficiaries.



Step	Action
1	Hover over the Prior Approval tab.
2	Select PA Search .

PA Search Page

The **PA Search** page allows authorized users to search for any PA using the **PA Review** section or to search for a specific PA using the **Search Criteria** section.

Step	Action
1	Enter data in one or more search criteria sections (in this example, the PA Number is used as the search criterion).
2	Select the Find button.


Search Results

All PAs that meet the search criteria are displayed in the **Search Results** section.

PA Number	Line	PA Type	Status	Recipient ID	Recipient Name	Requesting NPI	Billing NPI	Procedure	Effective Begin Date	Effective End Date	Alert Date	User ID
1	1	A99-PHARMACY	A-APPROVED						12/04/2019	12/04/2019	01/01/0001	

Step	Action
3	Select the PA Number link.

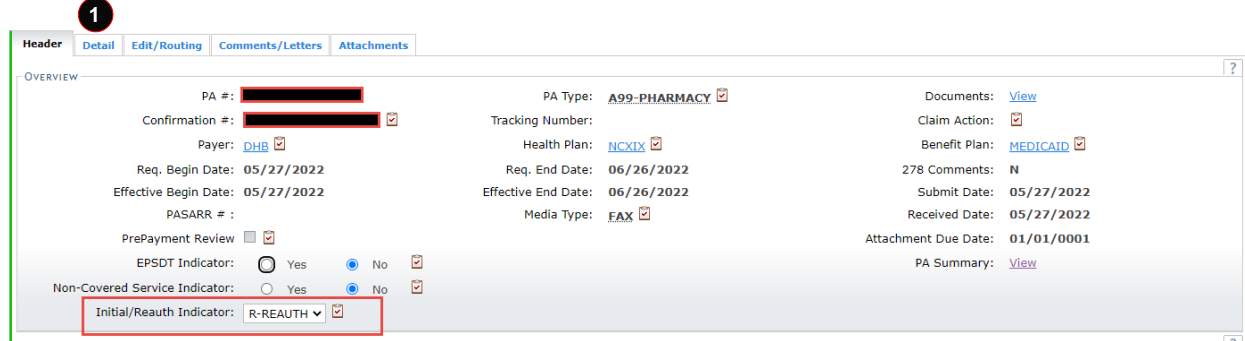
PA Detail Page – Header Tab

The **Header** tab breaks down the PA details into multiple sections. On this page, Audit icons () may display, indicating that the authorized user has the ability to view changes made to a value as well as who made the changes and when they were made.

The **Overview** section displays information assigned to or associated with the PA based on the information submitted during the entry process.

For A99 Pharmacy PAs, the Initial/Reauth Indicator in the Overview section will display as a drop-down field to indicate whether the request is for initial service or reauthorization of existing service.

1



The screenshot shows the 'Overview' section of the PA Detail Page. The 'Initial/Reauth Indicator' is a dropdown menu currently set to 'R-REAUTH'. Other fields include PA #, Confirmation #, Payer (DHB), Req. Begin Date (05/27/2022), Effective Begin Date (05/27/2022), PASARR #, PrePayment Review, EPSDT Indicator (Yes/No), Non-Covered Service Indicator (Yes/No), PA Type (A99-PHARMACY), Tracking Number, Health Plan (NCIX), Req. End Date (06/26/2022), Effective End Date (06/26/2022), Media Type (FAX), Documents (View), Claim Action, Benefit Plan (MEDICAID), 278 Comments (N), Submit Date (05/27/2022), Received Date (05/27/2022), Attachment Due Date (01/01/0001), and PA Summary (View).

1. If PA Type Code/Drug Class Code/FDB Drug Code combination is first request on file for the recipient, set Initial/Reauth Indicator to "Initial".

2. If PA record with same PA Type Code/Drug Class Code/FDB Drug Code combination exists on file for recipient AND duplicate PA has header status code of approved, modified approved, or reduced and PA Received Date of current request minus PA Effective End Date of previous request > 34 day, set Initial/Reauth Indicator to "Initial"

3. If PA record with same PA Type Code/Drug Class Code/FDB Drug Code combination exists on file for recipient AND duplicate PA has header status code of approved, modified approved or reduced AND PA Received Date of current request minus PA Effective End Date of previous request ≤ 34 day, set Initial/Reauth Indicator to "Reauth".

Users can access the PA Summary page via a link on the Header page.



The screenshot shows the 'Overview' section of the PA Detail Page for a different PA. The 'Initial/Reauth Indicator' is a dropdown menu currently set to 'I-INITIAL'. Other fields include PA #, Confirmation #, Payer (DHB), Req. Begin Date (06/01/2022), Effective Begin Date (01/01/0001), PASARR #, PrePayment Review, EPSDT Indicator (Yes/No), Non-Covered Service Indicator (Yes/No), PA Type (A04-DME), Tracking Number, Health Plan (NCIX), Req. End Date (07/31/2022), Effective End Date (01/01/0001), Media Type (FAX), E-Signature (NO), Documents (View), Claim Action, Benefit Plan (DHB ADMIN), 278 Comments (N), Submit Date (06/06/2022), Received Date (06/06/2022), Attachment Due Date (01/01/0001), and PA Summary (View).

PA Detail Page – Detail Tab

Select the **Detail** tab to display the PA details. The information is displayed in the **PA Detail**, **Diagnosis Codes**, and **PA Edits** sections of the page.

Step	Action
1	Select the Detail tab.

For A99 Pharmacy PAs, a PA Summary link is available on the detail page as well. Open the PA Summary Page to review the other PAs and the entered generic text. If the PA is a true reauthorization request, select the prior PA with the same generic code description in the Reauth PA Number field. Additionally, select Initial/Reauth Indicator on the header page to define the I/R status and ensure the correct letter is added for an adverse decision.

The screenshot shows the 'PA DETAIL' form. At the top, there are tabs: Header, Detail (selected), Edit/Routing, Comments/Letters, and Attachments. Below the tabs, there's a header section with fields for Effective Begin Date, Effective End Date, Proc. Code (E1238), Req Units (1.000), Req Unit Type, Approved Units (0.000), Approved Unit Type, Status (S-SUSPENDED), Date (06/06/2022), and User ID (ATROY671). The main body of the form contains two columns of fields. The left column includes Service Site, Req. Begin Date (06/01/2022), Req. Amount (\$0.00), Req. Frequency (0), Req Frequency Period, Req Duration (0), Req Duration Period, Used Units (0.000), Modifier, Last Claim Update, Encumbered Amount (0.00), Reauth PA Number, and a red box around 'PA Summary: View'. The right column includes Service Type, Req. End Date (07/31/2022), Approved Amount (\$0.00), Approved Frequency (0), Approved Period, Approved Duration (0), Approved Duration Period, Approved Rate (\$0.00), Used Amount (0.00), TCN, DME Service Type, History #, MOS Reason (01-NONE), and Medicare Coverage (Yes). At the bottom left, there's a checkbox for 'Is Proc Code A Generic Code?' with 'Yes' and 'No' options.

PA Type: A99-PHARMACY

SUMMARY OF PHARMACY PAs

PA Number	PA Status	Line	Requesting NPI	Effective Begin Date	Effective End Date	Units	Amount	Drug Name	Requested Drug Description
	D-DENIED	1	1639260243	04/22/2019	04/16/2020	0.000	\$0.00	00071101341 - LYRICA 50 MG CAPSULE	DIGIGLUSIN 1 UNITS TABLET
	D-DENIED	1	1922173889	08/07/2019	08/01/2020	0.000	\$0.00	C61-LIDODERM	
	S-SUSPENDED	1	1801054762	01/01/0001	01/01/0001	0.000	\$0.00	00025138131 - DAYPRO 600 MG CAPLET	
	S-SUSPENDED	1	1801054762	01/01/0001	01/01/0001	0.000	\$0.00		

Each record in the **PA Detail** section is called a detail line and contains the specifics of a requested service.

During a PA search, each detail line displays a summary of the requested services. The **Effective Begin Date**, **Effective End Date**, **Approved Units**, and **Approved Unit Type** fields are populated when the PA has a final status.

Step	Action
2	Click anywhere on the detail line.

The Reauth PA Number identifies the original/prior PA when current request is a reauthorization of a matching approved service.

Header	Detail	Edit/Routing	Comments/Letters	Attachments			
<div> <div>PA DETAIL</div> <div>?</div> </div>							
Line	Effective Begin Date	Effective End Date	FDB Drug Code	Drug Code Type	Status	Status Date	User ID
1	mm/dd/yyyy	mm/dd/yyyy	26666	2-GCN	S-SUSPENDED	06/09/2022	ATROY671
<div> <div>Drug Type: 43-GENERAL</div> <div> <div>Req. Begin Date: 06/09/2022</div> <div>Used Units: 0.000</div> <div>Used Amount: 0.00</div> </div> <div> <div>TCN:</div> <div>Reauth PA Number:</div> </div> <div> <div>PA Summary:</div> <div> <div> <div>* Requested Drug Different From Assigned Drug?:</div> <div> <div>Yes</div> <div>No</div> </div> </div> <div> <div>* Requested Drug Description:</div> <div> <div>Requested Drug Text:</div> <div> <div>250 characters remaining</div> </div> </div> </div> </div> </div></div>					<div> <div>History #:</div> <div>Req. End Date: 07/09/2022</div> <div>Remaining Units: 0.000</div> <div>Max Reimb/Claim:</div> <div>Last Claim Update: 01/01/0001</div> <div>MOS Reason: 01-NONE</div> </div>		
<div>Requested</div> <div> <div>* Units/30 days: 30.000</div> <div>* Length of Therapy: 1-30 DAYS</div> <div>Strength:</div> </div> <div> <div>Total Units: 30.000</div> <div>Amount: \$ 0.00</div> </div>							
<div>Approved</div> <div> <div>Units/30 days: 0</div> <div>Length of Therapy:</div> <div>Amount: \$ 0.00</div> </div> <div> <div>Total Units: 0.000</div> <div>Rate: \$ 0.00</div> </div>							
<div>Current Status</div> <div> <div>Status: S-SUSPENDED</div> <div>Reason:</div> <div>Determining Clinician:</div> </div> <div> <div>Date: 06/09/2022</div> <div>User ID: ATROY671</div> </div>							

JA_PA375_Pharm PA Adv Decision Ltrs - Drug Name Incl_W1.3.1

Header
Detail
Edit/Routing
Comments/Letters
Attachments

PA DETAIL

Line	Effective Begin Date	Effective End Date	FDB Drug Code	Drug Code Type	Status	Status Date	User ID
1	mm/dd/yyyy	mm/dd/yyyy	26666	2-GCN	S-SUSPENDED	06/09/2022	ATROY671

Drug Type: 43-GENERAL
Req. Begin Date: 06/09/2022
Used Units: 0.000
Used Amount: 0.00
TCN :
Reauth PA Number:
PA Summary: View

History #:
Req. End Date: 07/09/2022
Remaining Units: 0.000
Max Reimb/Claim:
Last Claim Update: 01/01/0001
MOS Reason: 01-NONE

Requested Drug Different From Assigned Drug?:
☒ Yes ☐ No

Requested Drug Description: 99
Requested Drug Text:
250 characters remaining

Requested

Units/30 days: 30.000
Strength:

Length of Therapy: 1-30 DAYS
Total Units: 30.000
Amount: \$ 0.00

Approved

Units/30 days: 0
Amount: \$ 0.00

Length of Therapy:
Total Units: 0.000
Rate: \$ 0.00

Current Status

Status: S-SUSPENDED ☐ Approved as Requested
Reason :
Determining Clinician:

Date : 06/09/2022
User ID: ATROY671

In the **Current Status** section, the user is able to select the appropriate status from the **Status** drop-down menu to identify the current status of the service listed on the detail line.

PA Adverse Decision Letters are generated for PA requests that have a status of D-DENIED, M-MODAPPROV, or R-REDUCTION. When the PA request has one of these statuses, the user must select the appropriate Reason.

Job Aid – PA375

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JA_PA375_Pharm PA Adv Decision Ltrs - Drug Name Incl_W1.3.1

Step	Action
3	<p>Select the appropriate Status from the Status drop-down menu.</p> <p>Note: A status of D-DENIED, M-MODAPPROV, or R-REDUCTION generates a PA Adverse Decision Letter.</p>
4	<p>Select the appropriate PA Status Reason Code from the Reason drop-down menu.</p> <p>Some of the PA Status Reason Codes that may populate for the user to select if the PA request is D-DENIED, M-MODAPPROV, or R-REDUCTION are:</p> <ul style="list-style-type: none"> DD1 – PA ADD INF – PA record is denied for lack of receipt of requested additional information. If the DD1 Reason Code is assigned to a line, the Additional Information and Policy sections display for the user to complete. DD2 – POLICY – Service not supported by State policy. If the DD2 Reason Code is assigned to a line, the Policy and Denial Reason sections display for the user to complete. DD3 – LN ADD INF – Individual service is denied for lack of information. If the DD3 Reason Code is assigned to a line, the Additional Information and Policy sections display for the user to complete. DD4 – NOT CVRD – Service is not covered by the State Medicaid plan. If the DD4 Reason Code is assigned to a line, the Service Code and Service Description are generated from the existing information on the PA record.

Policy

5

* Policy Name:

99

Leading Text: Medical Health Plan policy rules found at [Policy Section] of [Policy Name] guided our decision.

6

Policy Name Text:

250 characters remaining

7

* Policy Section Level 1:

99

Leading Text: Medical Health Plan policy rules found at [Policy Section] of [Policy Name] guided our decision.

8

Policy Section Level 1 Text:

125 characters remaining

Policy Section Level 2:

NONE

Policy Section Level 2 Text:

Policy Section Level 3:

NONE

Policy Section Level 3 Text:

9

Policy Citation

Available Options

10

Add >

Add All >

< Remove

< Remove All

Selected Options

99

Leading Text: Here are the policy requirements your request did not meet:

11

Policy Citation Text:

500 characters remaining

Denial Reason

12

* Denial Reason:

99

13

Denial Reason Text:

1000 characters remaining

EPSDT Reason

☐ EPSDT 1 - Not covered by federal Medicaid program

☐ EPSDT 2 - Experimental or investigational treatment

☐ EPSDT 3 - Correct or ameliorate standard

STATUS HISTORY

Status	Reason	Status Date	User ID
TOBEDENIED	<input checked="" type="checkbox"/>	03/27/2020	ATROYTEST

Appeal Status

Status:

Date:

Job Aid – PA375

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JA_PA375_Pharm PA Adv Decision Ltrs - Drug Name Incl_W1.3.1

Note: When the user is manually entering information in any text field on the PA, the system will utilize the spell check and grammar functionality. Grammar errors are identified with a green underline and spelling errors are identified with a red underline.

If the user hovers over the identified errors highlighted in green, the system will display suggested grammar corrections for the user to select.

If the user hovers over the identified errors highlighted in red, the system will display suggested spelling corrections for the user to select.

Additionally, the number of errors is populated in the bottom-right corner of the field. If no errors are identified, a check mark displays in the bottom-right corner of the field. All identified grammar errors in any field on the PA must be corrected in order for the PA to be saved.

When the user feels that a spelling error identified is not an error but accurate NCTracks PA text, the user can override the error by selecting the **Override Spell Check** checkbox on the page. Depending on the PA Type, when the user selects the **Update** or **Add** button, the user receives a validation message that spelling/grammar errors remain and the **Override Spell Check** checkbox displays.

Spelling error words overridden by State users will immediately be added to the tool's customized dictionary; when used again during PA adjudication, these words will not appear as errors and will not be available for lookup on the [PA Spell Check Override Search page](#).

Step	Action
5	Select the appropriate Policy Name from the Policy Name drop-down menu (in this example, the Policy Name used is 99-Other). Note: If 99-Other is selected for the Policy Name, the system displays the Leading Text information and a Policy Name Text.
6	Enter the Policy Name Text information. Note: The Policy Name Text field is where the user must manually enter the policy information in the text field.
7	Select the appropriate option from the Policy Section Level 1 drop-down menu. Note: If 99-Other is entered for Policy Section 1, then no section level 2 or 3 can be entered by the user.
8	Enter the Policy Section Level 1 Text information. Note: This field populates when 99-Other is selected from the Policy Section Level 1 drop-down menu. From the Policy Section Level 2 and Policy Section Level 3 drop-down menus, the user is able to select the None option.
9	Select the appropriate option(s) from the Available Options list in the Policy Citation section.
10	Select the Add or Add All option to add the option(s) to the list in the Selected Options section.
11	Enter Policy Citation Text information. Note: If 99-Other is selected for the Policy Citation ID, the Policy Citation Text field displays and the user is required to manually enter the appropriate text. If the selected Policy Name code is not 99-Other , the system displays the description of each selected Policy Citation. Predefined and manually entered citation text cannot be combined to complete the policy and denial decision information for the DD2 reason.
12	Select the appropriate Denial Reason from the Denial Reason drop-down menu. Note: If the user selected the 99 value from the policy citation available options, then 99 is the only option for selection in the Denial Reason drop-down menu.

Step	Action
13	Enter Denial Reason Text information. Note: If 99-Other is selected for the Denial Reason, the system displays the Denial Reason Text field for the user to manually enter information.

Note: The **EPSDT Reason** section allows the user to enter the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) criteria specific to the decision. The information entered is used in the generation of the corresponding PA Adverse Decision Letter.

If the denial reason is DD2 or DD4 and the beneficiary is under age 21, the **EPSDT Reason** section will populate for the user to complete. The user must select one or more checkboxes for EPSDT 1, EPSDT 2, or EPSDT 3. If EPSDT 2 or EPSDT 3 is selected, the user must enter text explaining why the EPSDT criterion was not met.

If the denial reason is DD4 and the beneficiary is 21 years or older, no additional sections will populate and the user is not required to enter any new letter information on the line.

Update the PA

Once the **Update** button is selected, the user will receive an NCTracks pop-up message that displays a preview of the Adverse Decision Letter being added for a PA request with the status of Denied, Modified Approved, or Reduction.

Note: If any spelling/grammar errors remain, the **Override Spell Check** checkbox displays.

Step	Action
14	Select the Update button.

Step	Action
15	<p>Select the OK or Cancel button.</p> <ul style="list-style-type: none"> If the user selects OK, the system closes the window and allows the user to continue the adjudication process. If the user selects Cancel, the system closes the window and keeps the user on the detail line to make corrections as needed. If corrections are made and the user selects Update, Validate, or Save, as required for the PA type, a new letter preview is generated.

Step	Action
16	Select the Save button.

When the **Save** button is selected, an NCTracks pop-up message displays, advising the user of the letter being added for adverse decision status and confirming if the user wants to continue.

NC Tracks

The Medicaid 2001E letter will be added for the adverse decision status.
Are you sure you want to continue?

OK Cancel

Effective Begin Date	Effective End Date	Proc. Code	Req Units	Req Unit Type	Approved Units	Approved Unit Type	Status	Date	User ID
07/21/2020	07/20/2021		1.000		0.000		D-DENIED	05/20/2020	

If the user selects **OK**, the system generates the letter identified in the message and populates the Save Successful message. If the user selects **Cancel**, the system navigates the user back to the detail page to complete the processing prior to selecting the option to save the PA update.

NCTracks Success Message

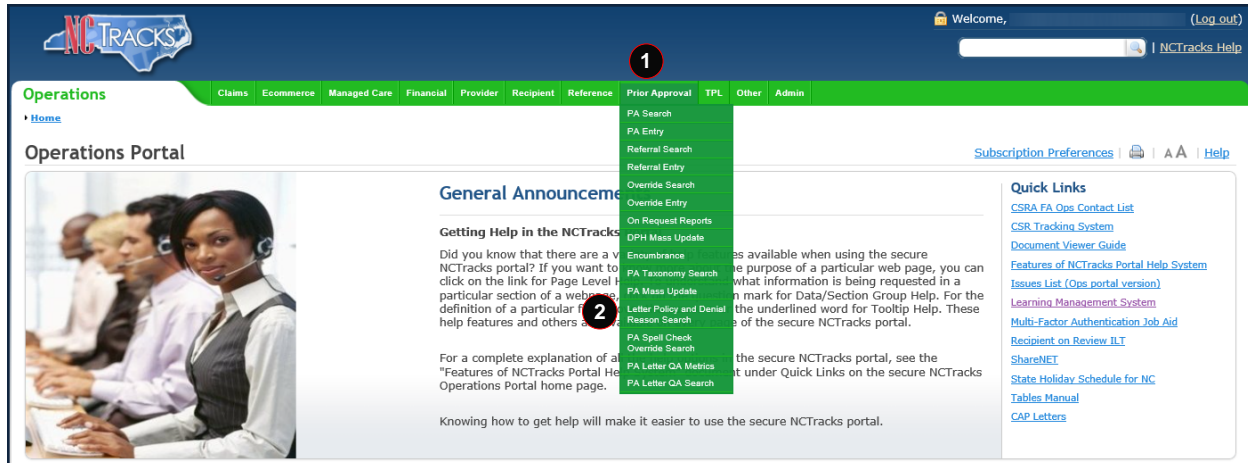
When the PA data is accepted, the application navigates to the **PA Search** page. This page displays an “NCTracks Success” message with the PA number, the confirmation number, the status of the PA, and a note that the PA was saved successfully.

NCTracks Success

PA # [redacted] is updated
Confirmation # [redacted]
Status is D-DENIED
Save Successful

LETTER POLICY AND DENIAL REASON SEARCH

The **Letter Policy and Denial Reason Search** page allows authorized users to search and generate PA criteria sequences. Authorized users can access this page by selecting **Prior Approval > Letter Policy and Denial Reason Search**.

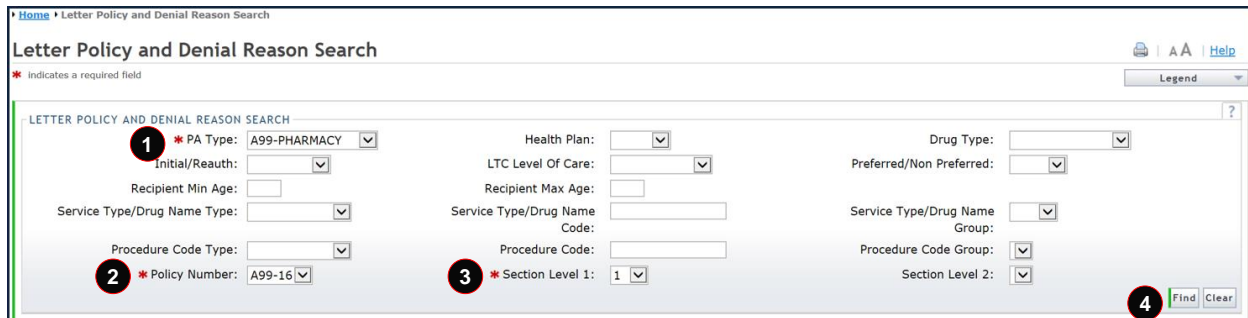


Step	Action
1	Hover over the Prior Approval tab.
2	Select Letter Policy and Denial Reason Search .

Letter Policy and Denial Reason Search Page

The **Letter Policy and Denial Reason Search** page allows an authorized user to enter PA record criteria to search for the associated letter policy and denial reason.

When completing a Letter Policy and Denial Reason search, the user must select the appropriate options for the **PA Type**, **Policy Number**, and **Section Level 1** fields.



Step	Action
1	Select the PA Type from the drop-down menu.
2	Select the Policy Number from the drop-down menu.
3	Select the Section Level 1 from the drop-down menu.
4	Select the Find button.

Letter Policy and Denial Reason Search Results

The **Search Results** section displays each unique PA criteria sequence matching the entered Letter Policy and Denial Reason search criteria.

Selecting a **PA Criteria Sequence Number** link directs the user to the **Letter Policy and Denial Reason Detail** page to view the PA criteria sequence details and all policy and denial reasons associated with the selected sequence number.

SEARCH RESULTS

PA Criteria Sequence Number

510

511

Step	Action
1	Select a PA Criteria Sequence Number from the Search Results.

Letter Policy and Denial Reason Detail Page

The **Letter Policy and Denial Reason Detail** page displays the details for the PA Criteria Sequence Number selected on the **Letter Policy and Denial Reason Search** page.

HomeLetter Policy and Denial Reason SearchLetter Policy and Denial Reason Detail

Letter Policy and Denial Reason Detail - 510

PA Type: A99-PHARMACY

Initial/Reauth:

Recipient Min Age: 0

Service Type/Drug Name Type: I-INDIVIDUAL

Procedure Code Type:

Health Plan: N/A

LTC Level Of Care:

Recipient Max Age: 115

Service Type/Drug Name Code: C30

Procedure Code:

Drug Type: 16-ANTIEM AGT

Preferred/Non Preferred: N-NO

Service Type/Drug Name Group:

Procedure Code Group:

Field	Description
PA Type	PA Type value in the PA criteria
Health Plan	Health Plan value in the PA criteria
Drug Type	Drug Type value in the PA criteria; only applicable to pharmacy PAs
Initial/Reauth	PA header status in the PA criteria
LTC Level of Care	Level of care in the PA criteria; only applicable to Long-Term Care (LTC) PAs
Preferred/Non Preferred	Drug type status in the PA criteria; only applicable to pharmacy PAs
Recipient Min Age	Youngest recipient age to which the PA criteria are applicable
Recipient Max Age	Oldest recipient age to which the PA criteria are applicable
Service Type/Drug Name Type	Category of the entered non-pharmacy service type or pharmacy drug name
Service Type/Drug Name Code	Individual non-pharmacy service type or pharmacy drug name in the PA criteria
Service Type/Drug Name Group	Group name of non-pharmacy service types or pharmacy drug names in the PA criteria
Procedure Code Type	Category of the entered procedure code value
Procedure Code	Individual procedure code in the PA criteria
Procedure Code Group	Group name of procedure code in the PA criteria

Policy/Section/Denial Information

The authorized user can view the details for each populated policy and denial reason combination by expanding the row.

The authorized user can end-date Policy and Denial Reason combinations listed in the **Policy**, **Policy Section**, **Policy Citation**, and **Policy Denial Reason** sections.

If a Policy and Denial Reason combination is end-dated, it will not be available for a user to select as an option when adding Adverse Decision Letter information at the time of processing the PA request.

Home • Letter Policy and Denial Reason Search • Letter Policy and Denial Reason Detail

Letter Policy and Denial Reason Detail - 510

* Indicates a required field

PA Type: A99-PHARMACY Health Plan: N/A Drug Type: 16-ANTIEM AGT
 Initial/Reauth: LTC Level Of Care: Preferred/Non Preferred: N-NO
 Recipient Min Age: 0 Recipient Max Age: 115
 Service Type/Drug Name Type: I-INDIVIDUAL Service Type/Drug Name: C30
 Procedure Code Type: Procedure Code: Procedure Code Group:

* Policy Number	* Policy Name	* Begin Date	* End Date	User ID	Last Update
A99-16	Outpatient Pharmacy Policy, Prior Approval Criteria For Antiemetic Agents	11/01/2019	12/31/9999	CSR 2109	02/26/2020 05:23:03 PM
99	Other	11/01/2019	12/31/9999	CSR 2109	02/26/2020 05:23:03 PM

250 characters remaining

Add Clear

* Policy Number	* Section Level 1	* Section Level 1 Name	* Begin Date	* End Date	User ID	Last Update
A99-16	1	Criteria Section	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
A99-16	99	Other	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
99	99	Other	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM

125 characters remaining

Add Clear

+ POLICY SECTION LEVEL 2

+ POLICY SECTION LEVEL 3

+ POLICY CITATION

+ POLICY DENIAL REASON

Save Reset Page

Adding a New Policy and Denial Reason

An authorized user can add new Policy and Denial Reason combinations in the open rows within the **Policy**, **Policy Section**, **Policy Citation**, and **Policy Denial Reason** sections.

If the authorized user is adding a new Policy and Denial Reason combination, the system validates the new entry to ensure it does not exist for an active record.

The authorized user must select the **Add** button. Once the **Add** button is selected, the system verifies the new criteria information entered against all existing criteria; if a match is found, the user will receive a "PA criteria already exists" error message. In such cases, the user must modify the criteria or search for the criteria to obtain the details.

If no match is found, the authorized user will be redirected to the **Letter Policy and Denial Reason Detail** page to enter new criteria information.

Home • Letter Policy and Denial Reason Search • Letter Policy and Denial Reason Detail

Letter Policy and Denial Reason Detail - 510

* Indicates a required field

LETTER POLICY AND DENIAL REASON DETAIL

PA Type: **A99-PHARMACY** Health Plan: **N/A** Drug Type: **16-ANTIEM AGT**
 Initial/Reauth: LTC Level Of Care: Preferred/Non Preferred: **N-NO**
 Recipient Min Age: **0** Recipient Max Age: **115**
 Service Type/Drug Name Type: **I-INDIVIDUAL** Service Type/Drug Name Code: **C30**
 Procedure Code Type: Procedure Code: Procedure Code Group:

* Policy Number	* Policy Name	* Begin Date	* End Date	User ID	Last Update
A99-16	Outpatient Pharmacy Policy, Prior Approval Criteria For Antiemetic Agents	11/01/2019	12/31/9999	CSR 2109	02/26/2020 05:23:03 PM
99	Other	11/01/2019	12/31/9999	CSR 2109	02/26/2020 05:23:03 PM

250 characters remaining

Add Clear

* Policy Number	* Section Level 1	* Section Level 1 Name	* Begin Date	* End Date	User ID	Last Update
A99-16	1	Criteria Section	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
A99-16	99	Other	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM
99	99	Other	11/01/2019	12/31/9999	CSR 2109	02/27/2020 09:58:52 AM

125 characters remaining

Add Clear

* POLICY SECTION LEVEL 2

* POLICY SECTION LEVEL 3

* POLICY CITATION

* POLICY DENIAL REASON

Save Reset Page

Adding New PA Criteria

The authorized user is also able to generate a new PA criteria sequence in the **Add New PA Criteria** section. To add a new PA criteria sequence, the authorized user selects the appropriate PA Type, enters the PA record details, and selects the **Add** button.

When making selections in the **Add New PA Criteria** section, the authorized user may be presented with the error message "Selection not allowed for the PA Type" if the selected option is not applicable to the PA Type.

ADD NEW PA CRITERIA

1 * PA Type: Health Plan: Drug Type:
 Initial/Reauth: LTC Level Of Care: Preferred/Non Preferred:
 Recipient Min Age: Recipient Max Age:
 Service Type/Drug Name Type: Service Type/Drug Name Code: Service Type/Drug Name Group:
 Procedure Code Type: Procedure Code: Procedure Code Group:
 2 Add

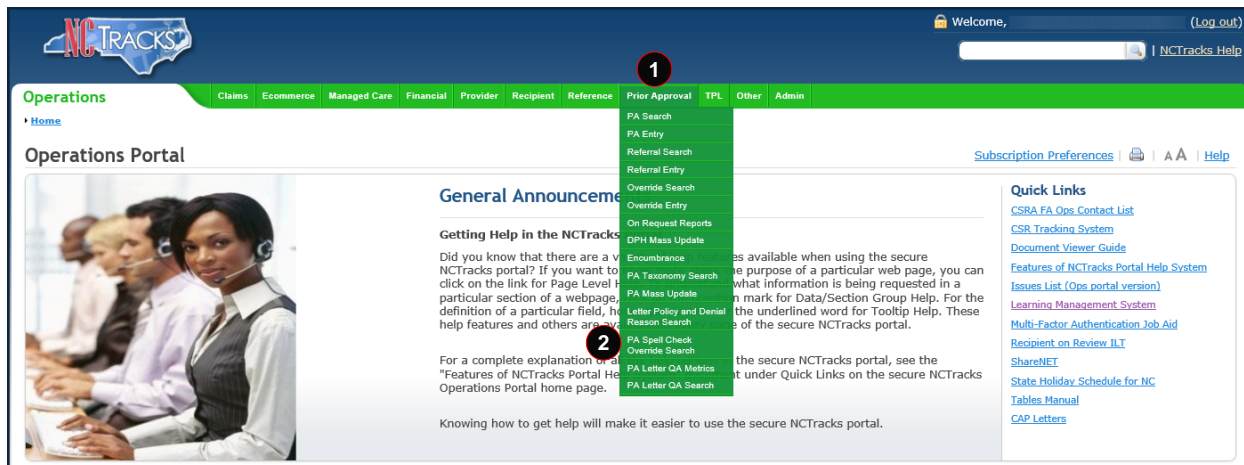
Step	Action
1	Select the PA Type that you want to add.
2	Select the Add button.

Once the authorized user has selected the **Add** button, the system verifies that the information entered is unique and not associated with an existing sequence number.

If the entered information passes the system validation, the authorized user is directed to the **Letter Policy and Denial Reason Detail** page to add policy and denial reason information to be associated with the new PA criteria.

PA SPELL CHECK OVERRIDE SEARCH

The **PA Spell Check Override Search** page allows users to search words identified as having spelling errors but overridden by the user.



Step	Action
1	Hover over the Prior Approval tab.
2	Select PA Spell Check Override Search .

PA Spell Check Override Search Page

The **PA Spell Check Override Search** page displays. The search can be performed for a single word or by using search criteria. Search Results will be displayed in inquiry mode only.

Additionally, authorized users can retrieve the next available word to review for acceptance into the customized spell check dictionary.

Field	Description
PA Type	Drop-down lists the PA Types Note: The user must select a PA Type in order to navigate to the PA Spell Check Override Detail page to view the next word to be reviewed for the selected PA Type.
# of Words for Review	Count of override word records ready for review for the selected PA Type
Next Word	Directs the user to the PA Spell Check Override Detail page to view the next word to be reviewed for the selected PA Type
Count	Displays the number of override word records ready for review
Override Word	Unique search criterion; if Override Word entered, no other search criteria are allowed
PA Type	Drop-down lists the PA Types
Status	Drop-down lists the QA Status
User ID	User who last updated the record
Record Begin Date	Date override word record added in NCTracks Note: Record Begin Date and Record End Date must be used together with at least one other search criterion.
Record End Date	Date override word record added in NCTracks Note: Record Begin Date and Record End Date must be used together with at least one other search criterion.
Find	Submits entered criteria
Clear	Clears all entered criteria

PA Spell Check Override Search Results

The **Search Results** section displays the **Override Word**, **PA Num**, **Letter Number**, **Policy Sequence Num**, **PA Type**, **Status**, **UI Page Name**, **UI Field Name**, **Review Date**, and **User ID** for the entered criteria.

SEARCH RESULTS									
Override Word	PA Num	Letter Number	Policy Sequence Num	PA Type	Status	UI Page Name	UI Field Name	Review Date	User ID
rsn		2530		A05-DENTAL	N-NEW	1-DETAIL	08-DENIAL RSN	05/11/2020	ATROY671

Step	Action
1	Select the Override Word link.

PA Spell Check Override Detail Page

The **PA Spell Check Override Detail** page displays. This page allows users to complete the review of the override word or view the record details.

PA Spell Check Override Detail - rsn

PA Spell Check Override Detail:

Override Word: rsn	PA Number:	Letter Number: 2530
UI Page Name: 1-DETAIL	UI Field Name: 08-DENIAL RSN	Detail Line: 1
Status: N-NEW	User ID:	Review Date: 05/11/2020

Field	Description
Override Word	Text of override word
PA Number	PA number associated with the override word
Letter Number	Internal NCTracks Letter ID
UI Page Name	Operations Portal page that contains the override word
UI Field Name	Text field on the Operations Portal page that contains the override word
Detail Line	Detail line associated with the UI page and text field
Status	<p>Displays the status of the record. From the Status drop-down menu, the user is able to select A-ACCEPT or R-REJECT. Status values I-IND ACCEPT, J-IND REJECT, and V-VOID are automatically set by the system.</p> <p>Note: The N-NEW status displays when an override word is added to the system.</p> <p>Following are the status codes for override words added by Fiscal Agent (FA) users:</p> <ul style="list-style-type: none"> N-NEW – Default code when override word is added A-ACCEPT – Manually assigned by authorized FA supervisor R-REJECT – Manually assigned by authorized FA supervisor I-IND ACCEPT – Assigned by NCTracks when a different override record for the same word is set to A by an authorized FA or State user J-IND REJECT – Assigned by NCTracks when a different override record for the same word is set to R by an authorized FA or State user

Field	Description
	<ul style="list-style-type: none"> • V-VOID – Assigned by NCTracks when PA letter associated with the override word is deleted If the prior status was A or R, then all other existing override records for the same word are also set to V. If the prior status was A, then the override word is also deleted from the custom spell check dictionary. <p>Following are the status codes for override words added by State users:</p> <ul style="list-style-type: none"> • A-ACCEPT – Default code when override word is added • R-REJECT – Manually assigned by authorized State user • V-VOID – Assigned by NCTracks when PA letter associated with the override word is deleted If the prior status was A or R, then all other existing override records for the same word are also set to V. If the prior status was A, then the override word is also deleted from the custom spell check dictionary. <p>Note: All override words added by State users are automatically assigned the status of A-ACCEPT.</p>
User ID	User who last updated the record
Review Date	Date the record was last updated